

B. J. CLACK MEMORIAL SCHOLARSHIP

\$10,000 SCHOLARSHIP AWARD

GENERAL INSTRUCTIONS: Answer all questions to the best of your ability and follow instructions completely. The selection of Winners will be influenced by the completeness of the replies, neatness and the eligibility. **DEADLINE IS MAY 13, 2022 AT NOON.** Completed applications, placed in a folder, should be returned to the counseling office by noon Friday, May 13th.

Your application will be considered ONLY if you meet the following requirements:

- ❖ You are a senior at Chickasha High School
- ❖ You demonstrate a strong commitment to pursue higher education
- ❖ You include a high school transcript and ACT score
- ❖ You have an overall GPA of 2.5 or higher
- ❖ You possess high moral character
- ❖ You include one letter of recommendation
- ❖ You demonstrate financial need - a copy of your parent or guardian's most recent Federal Income Tax Return included

Last Name	First Name	M.I.	
Student's Address	City	State	Zip Code
Phone	SS#	Gender: _____ Male _____ Female	

Parent/Guardian Name	Parent/Guardian Address <small>if different from above</small>
----------------------	--

I, _____, will graduate this spring and plan to continue my education in college starting _____. If I am chosen as a recipient of this program, I understand that in order to accept this award I must attend a 2 or 4 year accredited college in the United States. I also understand I must maintain a 2.5 or higher grade point average.

Student Signature

College I plan on attending: _____
Name and Address

WORK ACTIVITIES:

Are you now employed? Yes ____ No ____ If yes, what type of work and how many hours per week?

Describe your other work activities such as family farm, family business home responsibilities:

EXTRACURRICULAR ACTIVITIES AND LEADERSHIP ROLES:

(May attach resume for this section)

Student Activities (including years of participation) _____

Leadership Positions/Accomplishments (including year of position or accomplishment)

Special Recognition, Awards, Honors (including sponsoring group and year of accomplishment)

FAMILY INFORMATION:

Number of dependents in your family including yourself: _____

Children _____ Ages _____ Number Attending College (including yourself) _____

Please provide a brief summary of your family. Include your parent/guardian professions and your general family situation.

Financial Need: In the space provided please indicate your family's adjusted gross income from last year's tax return. Please attach a copy of the first two pages of your parent/guardian 2017 federal income tax return. These pages will be used to verify line checked below and then destroyed. Income tax forms will not be shared with the scholarship selection committee.

_____ under \$15,000	_____ \$30,000 - \$35,000
_____ \$15,000 - \$20,000	_____ \$35,000 - \$50,000
_____ \$20,000 - \$25,000	_____ over \$50,000
_____ \$25,000 - \$30,000	_____ over \$75,000

Other financial considerations that should be considered:

Cost of attendance at the college you plan to attend:

Tuition _____ per year Room & Board _____ per year Total _____ per year

Will you live at home while attending college? _____

COMMUNITY SERVICE (include description of service and number of hours involved)

FUTURE EDUCATION AND CAREER PLANS:

Intended college major: _____

Career goal: Briefly state your goals and indicate your career aspirations.

List below all other scholarships, tuition waivers, etc. for which you have applied and the amount(s) you have been rewarded.

ACADEMIC INFORMATION (to be verified by high school counselor)

Highest ACT Composite Score _____ Date Taken _____

Highest SAT Composite Score _____ Date Taken _____

GPA (weighted) _____ Rank in Class _____ out of _____

Counselor's Signature _____

Attach an unofficial copy of your seventh semester transcript with test scores include